IL HIE Advisory Committee Behavioral Health Work Group Meeting Notes January 10, 2013

Attendees (all by phone)

Connie Christen, Department of Healthcare and Family Services
Dia Cirillo, Office of Health Information Technology (OHIT)
Kim Darnstaedt, The H Group
Kathye Gorosh
Jim Hobbs, Department of Human Services (DHS)
Marvin Lindsey, Community Behavioral Health Association of Illinois
Rick Nance, Department of Human Services
Dr. Nicholas Panomitros, Illinois Health Information Exchange Authority Board

ILHIE Advisory Committee and OHIT Update

Dia Cirillo reported on the advisory committee meeting held on January 7th. OHIT Director Laura Zaremba did a presentation on the White Space Program grants. White Space health care providers are those who are practicing in areas that are currently underserved by health information technology infrastructure. Three organizations were awarded a grant. They are Heartland Health Outreach, Illinois Critical Access Hospital Network and Southern Illinois Healthcare.

The Illinois Health Information Exchange and the Missouri Health Connection recently sent out a press release announcing that they are among the first in the nation to electronically exchange through Direct secure messages across state lines.

Dia said that the legislation for revising the Mental Health Act is going well. The intent is to ensure that any patient receiving Medicaid services or any patient whose provider is connected to a Health Information Exchange (HIE) the opportunity to have their health records on an HIE. Four organizations have endorsed the legislation so far, and they are: Illinois Alcohol and Drug Dependence Association, Illinois Association of Rehabilitation Facilities, Illinois Hospital Association and Illinois Psychiatric Society. It is expected that more organizations will sign on over the next month or so.

Behavioral Health Integration Project (BHIP) Update

Dia indicated that OHIT has three very successful use cases. One is emergency room diversion; one is lab and physicals for methadone treatment; and the third is the Screening, Assessment and Support Services project.

Dia discussed what has been learned from the BHIP Demonstration Projects. Moving forward, data sharing, care coordination and integration requires process know how, a sense that this is a team sport, that any new integrated service has to be piloted first because of so much process restructuring, and a commitment to outcome and process measures.

Dia referred to a recent research article about the benefits of health information technology and that research is showing that there are still high health care costs. In the current environment, providers are being paid for volume and not value. Unless and until providers are prepared to restructure their processes to create value outcomes over volume outcomes, there will still be high health care costs. This work group could help with providing direction on how to build the knowhow on process.

Prescription Drug Monitoring Program

Jim Hobbs reported on the Prescription Drug Monitoring Program at DHS. The current program is a web-based platform with 16,000 physicians and 5,000 pharmacists signed up. DHS was awarded a Substance Abuse and Mental Health Services Administration grant to develop proof of concept. DHS will collaborate with OHIT and some of the test partners that have signed up for the HIE. The intention for proof of concept is to test the technology to help decide which data elements providers want in their Electronic Medical Records systems.

DHS is collaborating with the Department of Public Health to develop a prescription monitoring program for all long term care beds (about 122,000) in Illinois to allow DHS to collect information on all prescribed medications and the use of physic tropic medications. The goal is to be able to link all of the medication information by patient with the minimum data set which will allow them to better evaluate the care being provided.

Comments to ONC on Topic Important to Behavioral Health

Marvin Lindsey sent the group a copy of the HIE Readiness Assessment for Behavioral Health Provider's, provider guidelines and asked that anyone with comments to please send to him.

Meeting adjourned. The next call is scheduled on February 7, 2013.